

SPECIAL POPULATION CENSUS SHEET

ENTER INFORMATION FOR ONE HOUSING UNIT PER SHEET

Page No.

Callback:

As required, return to the Office of Financial Management: **(1) The city Control Map** with boundaries and block numbers; **(2) Original Census Sheets** in order of house enumeration sequence by block; and, **(3) all tabulation sheets**. All map preparation, forms completion, and enumeration procedures are to be accomplished in accordance with procedures, definitions, and instructions as specified in the Administrator's Manual, the Enumerator's Manual, and the Tabulation Manual.

City/Town: _____	Block Numbering Area/Tract No.: _____
Year: _____	Block No.: _____
	Enumerator: _____

				One Entry Only		
1	2	3	4	5	6	7
Street or Road	House Address	Apt. No.*	Housing Unit Seq. No.*	No. of Units in Structure*	Mobile Home/ Trailer	Special**
					MH/TR	Spec.**

If Group Quarters, name of facility: _____

*Each housing unit in structures having only one house address, but more than one unit, should be separately identified by the letter or number appearing on the mail box and/or door. Each housing unit is to be assigned a different housing unit sequence number.

**Special Housing: Unusual living quarters not generally considered a housing unit (e.g., boats, boxcars, tents, recreational vehicles, etc.). Only counted when occupied by person meeting "resident" criteria. Specify type of housing: _____

BY USING THIS FORM, CITY AGREES TO KEEP ALL DATA COLLECTED CONFIDENTIAL.

CONFIDENTIAL

List name of each person whose usual place of residence on the date of enumeration was in this household. Enter last name first; list an adult first. *If needed, use the reverse side of this form for additional names or comments*

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- Do any of the persons listed above sleep elsewhere more than three nights per week? Yes ☐ No ☐
If yes, who _____ City _____ State _____
- Do any of the persons listed above attend school and not live at the above address during the school year? Yes ☐ No ☐
If yes, who _____ City _____ State _____
- Are any of the persons listed above members of the military and/or live on a military base or ship? Yes ☐ No ☐
If yes, who _____ City _____ State _____
- Do any of the persons listed above live more than six months of the year elsewhere? Yes ☐ No ☐
If yes, who _____ City _____ State _____
- Are there any other persons living in this house or on this property that I might miss? Yes ☐ No ☐

Total Persons: _____

Vacant: Yes ☐ No ☐